(617) 526-6000

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Telephone number

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## Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **REQUEST FOR ORAL HEARING** Docket Number (Optional) **BEFORE** 0114089.00121US1 THE BOARD OF PATENT APPEALS AND INTERFERENCES In re Application of Douglas B. WILSON **Application Number** 10/727,306-Conf. #5202 December 3, 2003 FATIGUE RELIEVING SUPPORT FOR STEERING WHEELS AND For THE LIKE 3682 Examiner Art Unit V. Luona Applicant hereby requests an oral hearing before the Board of Patent Appeals and Interferences in the appeal of the above-identified application. 1,000.00 The fee for this Request for Oral Hearing is (37 CFR 41.20(b)(3)) Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: 500.00 A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment 08-0219 . I have enclosed a duplicate copy of this sheet. to Deposit Account No. A petition for an extension of time under 37 CFR 1.136(b) (PTO/SB/23) is enclosed. For extensions of time in reexamination proceedings, see 37 CFR 1.550. I am the applicant/inventor. Signature assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. Wayne M. Kennard (Form PTO/SB/96) Typed or printed name attorney or agent of record. August 25, 2006 Date Registration number attorney or agent acting under 37 CFR 1.34.

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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative (\$\frac{1}{2}\) (\$

Registration number if acting under 37 CFR 1.34.

Submit multiple forms if more than one signature is required, see below\*.

forms are submitted.

\*Total of